

DEVELOPMENT SERVICES DEPARTMENT
Building Safety Division



14455 W. Van Buren St. Ste. D101
Goodyear, AZ 85338
Phone: (623) 932-3004
Web site: www.goodyearaz.gov

NEW CONSTRUCTION PERMIT APPLICATION

Project Name: _____ Property Address: _____ Sq. Ft.: _____ Parcel #: _____ Ste#: _____ Project valuation: _____ Site Lighting valuation: _____ Construction Type: _____ Occupancy Classification: _____ Occupant Load: _____ Specify use of occupancy _____ Property Owner: _____ Address: _____ City: _____ State: _____ Zip: _____ Email: _____ Contact name for inspections: _____ Contact phone # for inspections: _____	Contact Person: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____ Email: _____ Licensed Contractor: (Required prior to permit issuance!) Company Name: _____ Address: _____ City: _____ State: _____ Zip: _____ ROC License #: _____ Class: _____ AZ State Tax #: _____ Phone #: _____ Signature of Owner/Owner's _____ Representative: _____ Date: _____
This application is hereby made for permission to the following (detailed description of work MUST be provided): _____ _____ _____ ALL SUBMITTALS FOR THE ABOVE ARE TO INCLUDE THE FOLLOWING: <input type="checkbox"/> 2 City Approved Site Plan <input type="checkbox"/> 4 Detailed Construction Drawings <input type="checkbox"/> Design Professional's Seal, Signed, Dated, Expiration Date <input type="checkbox"/> Index Sheet – All Sheets Referenced in Plan Set <input type="checkbox"/> Demo Plan, if applicable <input type="checkbox"/> Site Lighting/Photometrics <input type="checkbox"/> Floor Plan <input type="checkbox"/> Soils Report <input type="checkbox"/> Structural Calculations <input type="checkbox"/> Detail Sheet(s), Walls, ADA, etc. <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Completed Deferral Request Form (included with this application packet) <input type="checkbox"/> Subsequent Reviews: <input type="checkbox"/> Written Response to Reviewer's Comment Letter <input type="checkbox"/> Original Comment Letter <input type="checkbox"/> Subsequent Reviews: <input type="checkbox"/> All redlines plans and calculations from previous review	OFFICE USE ONLY: 1st Review: <input type="checkbox"/> Project Data (Plan Reviewer to verify Applicant's Information) <input type="checkbox"/> Form A (form with project file to Bobbie to complete) <input type="checkbox"/> Request copy of AZ. Dept. of Revenue Bond Exemption Certificate (projects greater than \$50,000.00 valuation) <input type="checkbox"/> Water Meter Installation Request Form Prior to Permit Issuance: <input type="checkbox"/> Original Signed Form A <input type="checkbox"/> Civil Approval (Civil H.T.E. # or letter from Engineering Dept. waiting Civil and/or Landscape submittals) <input type="checkbox"/> Contractor information <input type="checkbox"/> Business Registration permit or completed application from contractor - \$75.00 fee <input type="checkbox"/> AZ. Dept. of Revenue Bond Exemption Certificate <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____ <input type="checkbox"/> Fees:

Date Filed: _____ Rcvd By: _____ Permit #: _____ Plan Review Fee Rcvd: _____

DEFERRAL REQUEST APPLICATION

Project Name: _____ Permit #: _____ Property Address: _____ Sq. Ft.: _____ Parcel #: _____ Lot#: _____ Associated Building Permit #: _____ Project valuation: _____ City's valuation: _____ Property/Business Owner: _____ Architect/Engineer _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ Fax: _____ Email: _____ I _____ acknowledge and agree to comply with the statement below pertaining to deferral of plans. Signature of Architect/Engineer _____ Date _____	Contact Person: _____ Address: _____ City: _____ State: _____ Zip: _____ Email: _____ I _____ acknowledge and agree to comply with the statement below pertaining to deferral of plans. Signature of Owner/Owner's Representative _____ Date _____ Licensed Contractor: <u>(Contractor performing work to be deferred – if contractor is known at this time). If more than one contractor involved, additional contractor information may be attached.</u> Company Name: _____ Address: _____ City: _____ State: _____ Zip: _____ ROC License #: _____ Class: _____ AZ State Tax #: _____ Phone #: _____ I _____ acknowledge and agree to comply with the statement below pertaining to deferral of plans. Signature of Contractor _____ Date _____												
<p>Deferred permit application submittals shall be obtained within 45 calendar days of issuance date of the building permit. In addition, no rough (frame, electrical, plumbing, or mechanical) inspections shall be scheduled prior to the issuance of <u>all</u> permits and/or approvals of deferred plans and/or deferred permit applications.</p> <p>If the permits and/or approvals of all deferred plans and deferred permit application submittals have not been obtained within 45 calendar days of the issuance of the building permit for this project, the Chief Building Official shall issue a stop work order on all work at the site.</p> <p><i>NOTE: The review time for deferred plan submittals and deferred permit application submittals may be longer than 45 calendar day time period. Applicant needs to consider the applicable review time frames and submit the deferred plans and permit application submittals well before having the building permit issued.</i></p>	<p style="text-align: center;"><u>LIST ALL SUBMITTALS TO BE REQUESTED FOR DEFERRAL</u></p> <table border="1" style="width: 100%; border-collapse: collapse; height: 150px;"> <tr><td style="width: 50%; height: 30px;"></td><td style="width: 50%; height: 30px;"></td></tr> <tr><td style="height: 30px;"></td><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td><td style="height: 30px;"></td></tr> <tr><td style="height: 30px;"></td><td style="height: 30px;"></td></tr> </table> Signature of Chief Building Official _____ Date _____												

OPERATIONAL PERMITS

All boxes shall be checked with the applicable 'YES' or 'NO'

CHECK ALL THAT APPLY		
YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. Operation of a special amusement building (105.6.2);
<input type="checkbox"/>	<input type="checkbox"/>	2. Aircraft servicing or repair and aircraft fuel-servicing vehicles in High-Hazard (Group H) occupancies and in any Storage (Group S) Occupancies (105.6.3)
<input type="checkbox"/>	<input type="checkbox"/>	3. Operation of a carnival or fair (105.6.4)
<input type="checkbox"/>	<input type="checkbox"/>	4. Storage, use, or handling at normal temperature and pressure (NTP) of compressed gases in excess of amounts listed in Table 105.6.8 of the International Fire Code (105.6.8)
<input type="checkbox"/>	<input type="checkbox"/>	5. The placement of retail fixtures and displays, concession equipment, displays of highly combustible goods and similar items in a covered mall (105.6.9)
<input type="checkbox"/>	<input type="checkbox"/>	6. The display of liquid or gas fired equipment in a covered mall (105.6.9)
<input type="checkbox"/>	<input type="checkbox"/>	7. The use of open-flame or flame producing equipment in a covered mall (105.6.9)
<input type="checkbox"/>	<input type="checkbox"/>	8. To produce, store, transport on site, use, handle or dispense cryogenic fluids in excess of the amounts listed in Table 105.6.10 of the International Fire Code (105.6.10)
<input type="checkbox"/>	<input type="checkbox"/>	9. Cutting operations and welding operations (105.1.11)
<input type="checkbox"/>	<input type="checkbox"/>	10. Dry cleaning operations (105.6.12)
<input type="checkbox"/>	<input type="checkbox"/>	11. Modifications of existing dry cleaning operations if the modification involves the use of a more hazardous cleaning solvent than is used in the existing operations (105.6.12)
<input type="checkbox"/>	<input type="checkbox"/>	12. Operation of exhibits and trade shows (105.6.13)
<input type="checkbox"/>	<input type="checkbox"/>	13. Manufacture, storage, handling, sale or use of any quantity of explosives, explosive materials, fireworks, or pyrotechnic special effects (105.6.14)
<input type="checkbox"/>	<input type="checkbox"/>	14. Use and/or operation of a pipeline for the transportation within facilities of flammable or combustible liquids (105.6.16)
<input type="checkbox"/>	<input type="checkbox"/>	15. Storage, handling, or use of Class I liquids in excess of:
<input type="checkbox"/>	<input type="checkbox"/>	a. 5 gallons (19 L) in a building
<input type="checkbox"/>	<input type="checkbox"/>	b. 10 gallons (37.9 L) outside of a building (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	16. Storage, handling, or use of Class II or Class IIIA in excess of:
<input type="checkbox"/>	<input type="checkbox"/>	a. Liquids in excess of 25 gallons (95 L) in a building
<input type="checkbox"/>	<input type="checkbox"/>	b. 60 gallons (227 L) outside a building (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	17. To remove Class I or Class II liquids from an underground storage tank used for fueling motor vehicles by any means other than the approved, stationary on-site pumps normally used for dispensing purposes (105.5.16)

OPERATIONAL PERMITS

All boxes shall be checked with the applicable 'YES' or 'NO'

CHECK ALL THAT APPLY		
YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	18. To operate tank vehicles, equipment, tanks, plants, terminals, wells, fuel-dispensing stations, refineries, distilleries and similar facilities
<input type="checkbox"/>	<input type="checkbox"/>	where flammable and combustible liquids are produced, processed, transported, stored, dispensed or used (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	19. To place temporarily out of service (for more than 90 days) an underground flammable or combustible liquid tank, a protected above-ground flammable or combustible liquid tank, or an above-ground flammable or combustible liquid tank (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	20. To change the type of contents stored in a flammable or combustible liquid tank to a material that poses a greater hazard than that for which the tank was designed and constructed (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	21. To manufacture, process, blend or refine flammable or combustible liquids
<input type="checkbox"/>	<input type="checkbox"/>	22. To dispense liquid fuels into the fuel tanks of motor vehicles at commercial, industrial, governmental, or manufacturing facilities (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	23. To use a site to dispense liquid fuels from tank vehicles into fuel tanks of motor vehicles at commercial, industrial, governmental, or manufacturing facilities (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	24. To operate a fruit or crop ripening facility or to conduct a fruit-ripening process using ethylene gas (105.5.16)
<input type="checkbox"/>	<input type="checkbox"/>	25. To engage in fumigation or thermal insecticidal fogging (105.6.19)
<input type="checkbox"/>	<input type="checkbox"/>	26. To maintain a room, vault or chamber in which a toxic or flammable fumigant is used (105.6.19)
<input type="checkbox"/>	<input type="checkbox"/>	27. To store, transport onsite, dispense, use or handle hazardous materials in excess of the amounts listed in Table 105.6.20 (105.6.20)
<input type="checkbox"/>	<input type="checkbox"/>	28. To store, handle or use hazardous production materials (105.6.21)
<input type="checkbox"/>	<input type="checkbox"/>	29. To use a building, or any portion of a building, as a high-piled storage area exceeding 500 square feet (46 m ²) (105.6.22)
<input type="checkbox"/>	<input type="checkbox"/>	30. Storage and use of LP-gas (105.6.27)
<input type="checkbox"/>	<input type="checkbox"/>	31. Operation of cargo tankers that transport LP-gas (105.6.27)
<input type="checkbox"/>	<input type="checkbox"/>	32. Kindling or maintaining of an open fire or a fire on any public street, alley, road, or other public or private ground (105.6.30)
<input type="checkbox"/>	<input type="checkbox"/>	33. Use and handling of pyrotechnic special effect material
<input type="checkbox"/>	<input type="checkbox"/>	34. Air-supported temporary membrane structures or a tent having an area in excess of 400 square feet (37m ²) or a canopy in excess of 700 square feet (65m ²) (105.6.43 as modified in code)
<input type="checkbox"/>	<input type="checkbox"/>	35. Outdoor public or private assembly event with projected attendance of 100 or more persons and outdoor public or private assembly events if 50 or more persons will be confined by permanent or temporary barricade or fencing (105.6.47)

COMMERCIAL PROJECT DATA SHEET

Permit#: _____		Project name: _____		Address: _____	
Code Year (Building, Fire, Plumbing, Mechanical, Electrical)		Special Inspections			
Construction Type:					
Occupancy Type / S.F. /Occupant Load					
Occupancy Type / S.F. /Occupant Load					
Occupancy Type / S.F. /Occupant Load					
Occupancy Type / S.F. /Occupant Load		Water Meter(s) (each water meter should be detailed separately below)			
Total S.F.		<input type="checkbox"/> Domestic <input type="checkbox"/> Landscape	Water Meter Size		*Please check one <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Turbine <input type="checkbox"/> Compound
Total Occupant Load		<input type="checkbox"/> Domestic <input type="checkbox"/> Landscape	Water Meter Size		*Please check one <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Turbine <input type="checkbox"/> Compound
OFFICE USE ONLY		<input type="checkbox"/> Domestic <input type="checkbox"/> Landscape	Water Meter Size		*Please check one <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Turbine <input type="checkbox"/> Compound
Total Calculated Valuation:		<input type="checkbox"/> Domestic <input type="checkbox"/> Landscape	Water Meter Size		*Please check one <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Turbine <input type="checkbox"/> Compound
Shell Building @ 80%		<input type="checkbox"/> Domestic <input type="checkbox"/> Landscape	Water Meter Size		*Please check one <input type="checkbox"/> Positive Displacement <input type="checkbox"/> Turbine <input type="checkbox"/> Compound
Water Pressure		OFFICE USE ONLY			
Total Fixture Units		Utility development fee TOTAL for the water meters described above is:			
Electrical Service Size					
Water Pressure					
Water Purveyor		<p>By signing below you authorize the City of Goodyear to purchase the water meters listed above. Your signature acknowledges that there are no refunds for <u>water meters</u> that are purchased by the City of Goodyear on behalf of this project. All other development fees may be refunded once a written request is received by the City of Goodyear's Development Services Department. If the water meter(s) noted above are incorrect, all civil, landscape and construction drawings will need to be revised to reflect the correct water meter size(s), type(s) and quantities.</p>			
Comments:					
All project data on this form has been verified by Plans Examiner: _____ Date: _____		_____ Signature of Owner/Owner's Authorized Representative		_____ Date	
***Please contact our Public Works Department at 623-932-3010 for meter install questions.					